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## FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Auth	orized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Restore America Supe	er PAC		
ADDRESS (number and street)	3263 Esplanade		
▼ Check if different			
than previously reported. (ACC)	Chico		CA 95973
2. FEC IDENTIFICATION N	UMBER ▼ CITY	<b>( ▲</b>	STATE ▲ ZIP CODE ▲
C C00615799	3. IS	THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb 2 Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:	Mar 2	20 (M3) Jun 20 (M6	Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (0		20 (M4) Jul 20 (M7	Oct 20 (M10) Jan 31 (YE)
July 15	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (0	Floorier	M   M   / D   D	in the State of
Year-End Report (\ July 31 Mid-Year Report (Non-electic	(d) 30-Day		
Year Only) (MY)	POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on M = M / D = D	in the State of
5. Covering Period 04		through 06	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined the	nis Report and to the best of r	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure			
Signature of Treasurer	e, Tim, , ,	[Electronically Filed]	Date 11 / 22 / 2016
NOTE: Submission of false, error	neous, or incomplete information	may subject the person signing	this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016